



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known

Application Number	09/971,627
Filing Date	October 9, 2001
First Named Inventor	Thomas Conrad MACK
Examiner Name	M. Ibrahim
Group Art Unit	1638
Total Number of Pages in This Submission 10	Attorney Docket Number N1388-0

ENCLOSURES (check all that apply)

- ☒ Fee Transmittal Form
- ☒ Fee Attached
- ☒ Amendment/Reply
- ☒ After Final
- ☐ Affidavits/declaration(s)
- ☒ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
- ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53
- ☐ Assignment Papers
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s)
- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify below):
- 1) Certificate of Express Mail Label No. EV207752932US

REMARKS:

SUBMITTED BY		Complete (if applicable)	
NAME & REG. NUMBER	Robert J. Jondle, Reg No.33,915		
SIGNATURE		DATE	December 19, 2003
		DEPOSIT ACCOUNT USER ID	



OFFICE TRANSMITTAL
for FY 2003
(Large Entity)

		Complete if Known	
		Application Number	09/971,627
		Filing Date	October 9, 2001
		First Named Inventor	Thomas Conrad MACK
		Examiner Name	M. Ibrahim
		Group Art Unit	1638
Total Amount of Payment	\$110.00	Attorney Docket Number	N1388-017

RECEIVED

DEC 30 2003

TECH CENTER 1600/2900

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge additional fees and credit any overpayment to Deposit Account Number 50-2368 in the name of Jondle & Associates P.C.
- ☒ Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status
2. ☒ Payment Enclosed
- ☒ Check
- ☐ Credit Card

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Fee Paid	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	[]
1052	50	Surcharge - late provisional filing fee or cover sheet	[]
1053	130	Non-English specification	[]
1812	2,520	For filing a request for reexamination	[]
1804	920	Requesting publication of SIR prior to Examiner action	[]
1805	1,840*	Requesting publication of SIR after Examiner action	[]
1251	110	Extension for reply within first month	[110.]
1252	420	Extension for reply within second month	[]
1253	950	Extension for reply within third month	[]
1254	1,480	Extension for reply within fourth month	[]
1255	2,010	Extension for reply within fifth month	[]
1401	330	Notice of Appeal	[]
1402	330	Filing a brief in support of an appeal	[]
1403	290	Request for Oral Hearing	[]
1451	1,510	Petition to institute a public use proceeding	[]
1452	110	Petition to revive -unavoidable	[]
1453	1,330	Petition to revive - unintentional	[]
1501	1,330	Utility issue fee (or reissue)	[]
1502	480	Design issue fee	[]
1503	640	Plant issue fee	[]
1460	130	Petitions to the Commissioner	[]
1807	50	Processing fee under 37 CFR 1.17(q)	[]
1806	180	Submission of Information Disclosure Statement	[]
8021	40	Recording each patent assignment per property (times number of properties)	[]
1809	770	Filing a submission after final rejection (37 CFR .129(a))	[]
1810	770	For each additional invention to be examined (37 CFR 1.129(b))	[]
1801	770	Request for Continued Examination (RCE)	[]
1802	900	Request for expedited examination of a design application	[]
1504	300	Publication fee for early, voluntary, or normal publication	[]
1505	300	Publication fee for republication	[]
1455	200	Filing application for patent term adjustment	[]
1456	400	Request for reinstatement of term reduced	[]
1814	110	Statutory Disclaimer	[]
		Other fee (specify)	[]

* Reduced by Basic Filing Fee Paid

SUBTOTAL

\$110.00

FEE CALCULATION

1. FILING FEE

Fee Code	Fee \$	Fee Description	Fee Paid
1001	770	Utility filing fee	[]
1002	340	Design Filing Fee	[]
1003	530	Plant Filing Fee	[]
1004	770	Reissue Filing Fee	[]
1005	160	Provisional Filing Fee	[]

SUBTOTAL \$

2. CLAIMS

Paid	Extra Claims	Fee	Fee
Total Claims [] - 20** = [] x \$18 = []			
Independent Claims [] - 3** = [] x 86 = []			
Multiple Dependent Claims + 290 = []			

**or number previously paid, if greater;

SUBTOTAL \$

SUBMITTED BY		Complete (if applicable)	
NAME AND REG. NUMBER	Robert J. Jondle, Reg. No. 33,915		
SIGNATURE		DATE	December 19, 2003
		DEPOSIT ACCOUNT USER ID	